

DECLARATION FOR PATENT APPLICATION

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
USE OF FOLLISTATIN TO INCREASE MUSCLE MASS specification of which

_____ is attached hereto.

X was filed on April 24, 2001 (Attorney Docket No. JHU1470-3)
as U.S. Application Serial No. _____

and was amended on _____
if applicable (the "Application").

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability of the subject matter of the Application as defined in Title 37, Code of Federal Regulations ("C.F.R."), § 1.56.

With respect to the Application, I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

60/054,461 August 1, 1997
(Application Serial No.) (Filing Date)

With respect to the Application, I hereby claim the benefit under 35 U.S.C. Section 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

| COUNTRY | APPLICATION NO. | FILING DATE | PRIORITY CLAIMED |
|---------|-----------------|-------------|------------------|
| | | | |

With respect to the Application, I hereby claim the benefit under 35 U.S.C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of the application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability of the subject matter of the Application as defined in Title 37, C.F.R., Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of the Application:

| | | |
|---|----------------------------------|--|
| <u>09/626,896</u> (Application Serial No.) | <u>07/27/00</u> (Filing Date) | <u>Pending</u> (Status) (patented, pending, abandoned) |
| <u>09/485,046</u> (Application Serial No.) | <u>01/31/00</u> (Filing Date) | <u>Pending</u> (Status) (patented, pending, abandoned) |

PCTUS98/15598
(Application Serial No.)

07/28/98
(Filing Date)

Pending
(Status)
(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: Se-Jin Lee

Inventor's signature: _____

Date: _____

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Post Office Address: 6711 Chokeberry Road, Baltimore, MD 21209

Full name of second inventor: Alexandra C. McPherron

Inventor's signature: _____

Date: _____

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